IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Yuji KUSANO

Title:

SYSTEM FOR MEDIATING SAFETY DRIVE INFORMATION, SAFETY DRIVE INFORMATION MEDIATING APPARATUS USED THEREIN AND METHOD FOR CONFIRMING SAFETY

DRIVE INFORMATION

Appl. No.:

Unassigned

Filing Date:

12/01/03

Examiner:

Unassigned

Art Unit:

Unassigned

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Yuji KUSANO

Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:	
[X]	Application Data Sheet (37 CFR 1.76) (2 pages).
[X]	Specification, Claims, and Abstract (23 pages).
[X]	Formal drawings (7 sheets Figures 1-5 6a-6e and 7a-7.

The filing fee is calculated below:

	Claims		Included		Extra		Rate		Fee
	as		in		Claims				Totals
	Filed		Basic Fee						
Basic Fee							\$770.00	=	\$770.00
Total Claims:	13	-	20	=	0	X	\$18.00	=	\$0.00
Independents:	6	-	3	=	3	X	\$86.00	=	\$258.00
If any Multiple	Dependen	t C	laim(s) pres	ent:		+	\$290.00	=	\$0.00
Surcharge unde	r 37 CFR	1.10	5(e) for late	filii	ng of	+	\$130.00		\$130.00
Executed Declaration and late payment of filing fee								=	
							SUBTOTAL:	=	\$1158.00
[] Small Entity Fees Apply (subtract ½ of above):							=	\$0.00	
TOTAL FILING FEE:								=	\$1,158.00

- A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X]The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ſ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

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